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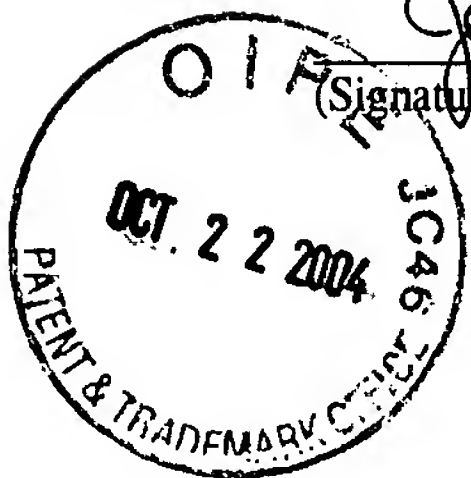
**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA , 22313-1450 on October 19, 2004

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara  
(Signature of Person Mailing Paper or Fee)



**PATENT APPLICATION**  
**Attorney Docket No. SUN-P7133-RA**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE PATENT APPLICATION OF )  
Partha P. Tirumalai ) Examiner: Fowlkes, Andre R.  
Serial No. 10/052,999 )  
Filing Date: November 2, 2001 ) Group Art Unit: 2122  
Title: METHOD AND APPARATUS FOR )  
INSERTING PREFETCH INSTRUCTIONS )  
IN AN OPTIMIZING COMPILER )

**AMENDMENT TRANSMITTAL LETTER**

Mail Stop: Non-Fee Amendment  
Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- ☒ Response under 37 C.F.R. § 1.111 to official action mailed September 23, 2004.
- ☐ A petition for extension of time is also enclosed with a fee of \$55.00 for a one-month extension for a small entity.
- ☐ Terminal disclaimer under 37 C.F. R. § 1.321(c), including
  - ☐ check for \$110.00 fee under 37 C.F.R. § 1.20(d), and
  - ☐ 2 certificates under 37 C.F.R. § 3.73(b).
- ☐ Information disclosure statement, form 1449 and \_\_\_ references.
- ☒ No additional claims fees are required.

☐ An additional fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
<b>TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT</b>					<b>\$0.00</b>

- ☐ A check in the amount of \$\_\_\_\_ is enclosed.  
☐ Charge \$\_\_\_\_ to Deposit Account No. \_\_\_\_ (Docket No. \_\_\_\_).  
☒ Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. SUN-P7133).

A. Richard Park  
Park, Vaughan & Fleming LLP  
508 Second Street, Suite 201  
Davis, CA 95616  
Tel: (530) 759-1663  
FAX: (530) 759-1665

Respectfully submitted,

By



A. Richard Park  
Registration No. 41,241

Date: October 19, 2004



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Application Number : 10/052,999  
Applicant : Partha P. Tirumalai  
Filed : November 2, 2001  
TC/A.U. : 2122  
Examiner : Fowlkes, Andre R.

Confirmation Number: 1267

Docket Number : SUN-P7133-RA  
Customer No. : 22,835

M/S: Box Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

### AMENDMENT

Sir

In response to the office action of **September 23, 2004**, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 9 of this paper.